

South Carolina Department of Social Services
FATHER INVOLVEMENT AND MARRIAGE QUESTIONNAIRE

FI Client: _____ Social Security No.: _____

Child/Children: (if same father) _____

1. Do you share parenting responsibilities with your child's father?

(Do you talk to him before making any decisions regarding your child's education, discipline, health, safety or well-being?)

☐ Yes ☐ No If no, why not? _____

2. How often does your child see his/her father? ☐ One or more times a week ☐ Less than once a month

☐ Once or twice a year ☐ Other: (specify) _____

3. Does your child spend time alone with his/her father? ☐ Yes ☐ No

If yes, how much time on average? _____

4. What type of activities does your child participate in when he/she is with his/her father? _____

5. Does your child's father attend school activities? (if applicable) ☐ Yes ☐ No

6. Do you have a good relationship with your child's father? ☐ Yes ☐ No

If no, why not? _____

7. Does your relationship with your child's father interfere with his relationship with your child? ☐ Yes ☐ No

If yes, why? _____

8. Have you ever been married to your child's father? ☐ Yes ☐ No

If no, have you ever considered marriage to him? ☐ Yes ☐ No If no, why not? _____

9. Does your child have anyone (not their father) that they consider a father figure? ☐ Yes ☐ No

If yes, what is that person's relationship to you? _____

10. Do you feel that it is important for your child to have a relationship with his/her father? ☐ Yes ☐ No

If no, why not? _____

Client's Initials: _____ Date: _____

Case Manager's Signature: _____ Date: _____